PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/577,855			ing Date 28/2006	To be Mailed
APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY											
	FOR	N	JMBER FIL	ED N	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		N/A		l	N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),	E or (q))	N/A		N/A		N/A		ı	N/A	
	CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x s =	
	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 = *			1	x \$ =			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drawi sheets of paper, the applicat is \$250 (\$125 for small entity additional 50 sheets or fracti 35 U.S.C. 41(a)(1)(G) and 3		ion size fee due /) for each on thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		l	TOTAL	
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	11/12/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	· 12	Minus	 20	= 0		x \$ =		OR	X \$52=	0
	Independent (37 CFR 1,16(h))	• 2	Minus	 3	= 0	1	x \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
L		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Z	Total (37 CFR 1,16(i))		Minus	**	=		x \$ =		OR	x \$ =	
AMENDMENT	Independent (37 CFR 1.16(h))		Minus	***	=]	x \$ =		OR	x s =	
핍	Application Size Fee (37 CFR 1.16(s))]					
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						TOTAL		OR		
									OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "O' in column 3. If the "Highest Number Previously Paid or 'N ITHS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "IN THIS SPACE is less than 3, enter "3". "ARSHA R. RICHARDS/ "If the "Highest Number Previously Paid For "(Tail or in dependend) is the highest number found in the appropriate box in column 1.											

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